

HA Hospital Visit (Health Declaration Form)

After log in to HA Go



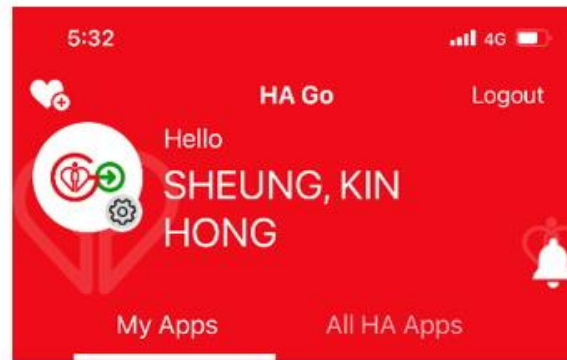
Visitor



HA Hospital Visit (Health Declaration Form)



Visitor



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Visitor

5:32 4G

< Hospital Visit

 醫院管理局
HOSPITAL
AUTHORITY

Hospital Visit
醫院探訪

This is health declaration form. The information is needed for prevention and contact tracing of infectious diseases. (*mandatory)
請填寫以下健康申報表，資料只會用於預防和追蹤傳染病。(*必須填寫)

Patient Information 病人資料

*Surname 姓

Given name 名

*Hospital 醫院
Select 請選擇 ▼

*Ward 病房
Select 請選擇 ▼

Bed number 床號

Visitor Information 訪客資料

Your full name (same as HKID card/Passport)
姓名 (與香港身份證/護照相同)


請貼上 QR 碼

Input all the information
* = Mandatory

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Visitor Information 訪客資料

Your full name (same as HKID card/姓名 (與香港身份證/護照相同)

*Surname 姓
SHEUNG

*Given name 名
KIN HONG

*Contact phone number 聯絡電話/手提電話
96522060

*Relationship 與病人關係
Select 請選擇

Assessment Items 評估項目		Yes 是	No 否
Symptoms 症狀	Fever 發燒	<input type="radio"/>	<input type="radio"/>
	Cough / Sore Throat / New loss of taste or smell / Runny nose / Diarrhoea 咳嗽 / 咽喉痛 / 近期失去味覺或嗅覺 / 流鼻水 / 腹瀉	<input type="radio"/>	<input type="radio"/>
Travel	Travel history outside Hong Kong within 14	<input type="radio"/>	<input type="radio"/>

請北理 - 修改

Visitor Information will be pre-filled if you are "Basic" or "Full" HA Go member

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Hospital Visit

Travel history 外遊史	Travel history outside Hong Kong within 14 days 過去14日內有外遊記錄	<input type="radio"/>	<input type="radio"/>
Contact / Clustering 接觸 / 群聚	Contact with confirmed case of COVID-19 within 28 days / currently under medical surveillance 過去28日內曾與確診為 COVID-19 的病例有接觸 / 正進行醫學監察	<input type="radio"/>	<input type="radio"/>

☐ *I hereby declare that the information provided is true and correct.
我特此聲明所提供的資料屬實

The above information will be stored for one month for the purpose of contact tracing. Children under 12 and pregnant women are NOT permitted for hospital visits.
上述資料只會保存一個月並在需要時用於疾病追蹤。未滿12歲兒童及孕婦不得探訪。

CONFIRM
確定

衞生署 · 醫院管理局

Click "CONFIRM" button to complete the form input

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填寫探訪資訊。



Visit Hospital: Cheshire Home,
Chung Hom Kok
探訪醫院: 春磡角慈氏護養院



Generated on 產生於 (DD-MM-YYYY): 30-10-2020

Or Send QR Code to 或傳送二維碼到
*Email 電郵
sheungkinhong@ha.org.hk

SEND EMAIL 傳送電郵

[Return to input health declaration form](#)
重新填寫健康申報表

 請私隱 · 保私

Keep this 24 hours valid QR Code and bring it to hospital for visit

You can send the QR Code to your email. Email address will be pre-filled if you are HA Go "Basic" or "Full" member